

Edmonds Municipal Court 250 5<sup>TH</sup> Ave North Edmonds WA 98020 edmcourt@edmondswa.gov (425) 771-0210 (425) 771-0269 Fax

LINDA W.Y. COBURN JUDGE

SHARON WHITTAKER COURT ADMINISTRATOR

## **TIME PAYMENT AGREEMENT**

NAME CASE NUMBER			
ADDRESS	PHONE	EMAIL	
CITY	STATE	ZIP	
All payments must begin within 30 days from	the date this agreer	ment is signed.	
The minimum monthly payment of \$50 or \$ beginning the month of			
Your insurance infraction will be dismissed up due in full by	oon payment of \$25	court costs. Your	balance of \$ is
A \$10 fee will be assessed for each infraction exceed \$25 per time payment agreement.	n that is placed on	a time payment ag	reement. This fee shall not
I promise to pay my penalty, as scheduled a initiated by me and approved by the Court. I further monetary penalty. The amount owed malso understand that if I fail to comply with my the Department of Licensing and my drivers licensing been paid.	understand that if r nay also be referre / legal financial obli	ny payment is not r d to a collection ago gation on a traffic o	made, I could be subject to ency per RCW 19.16.500. I offense, the Court will notify
Payments are to be made to the Edmonds M phone, by mail or by using the 24 hour drop by			ine at Edmondswa.gov, by
Payments can be made using a check, money HOUR DROP BOX OR SEND IT IN THE MAIL CARD TRANSACTIONS.			
Time pay statements are mailed as a courte receive a time pay statement or not.	esy. You are respo	nsible to make tim	ely payments whether you
Office hours are Monday, Tuesday, Thursday The Court is closed daily from Noon-1:00 p.m			nesday 8:00 a.m4:30 p.m.
DATE			
	DEFENDAN'	T'S SIGNATURE	
	CLERK'S IN	TIALS	